

# CLAIMS ONLY

Application Number

D9/866 938

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments					
	Indep	Depend	Indep	Depend	Indep	Depend						
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49												
50												
Total Indep	3											
Total Depend	5											
Total Claims	8											
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98												
99												
100												
Total Indep	17											
Total Depend	9											
Total Claims	26											

26  
34.